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TD 4 1 10 1 5 1 TT 4 1	Application Number	10/041,977	
TRANSMITTAL	Filing Date	January 9, 2002	
FORM	First Named Inventor	NICOLETTE	
•	Art Unit	1639	
(to be used for all correspondence after initial filing)	Examiner Name	Padmashri Ponnaluri	

Total Number of Pages in This Submiss	on 6	Attorney Docket N	umber	GA0118USC				
ENCLOSURES (check all that apply)								
Fee Transmittat Form	☐ Drawing(: ☐ Licensing ☐ Petition	s) -related Papers	After Allowance Communication to TC     Appeal Communication to Board of Appeals and Interferences     Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)     Proprietary Information     Status Letter     Other Enclosure(s) (please identify below): Return Postcard					
Amendment / Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request	Provision Power of Change of Terminal Request CD, Num	o Convert to a al Application Attorney, Revocation of Correspondence Add Disclaimer for Refund ber of CD(s)						
☐ Information Disclosure Statement ☐ Certified Copy of Priority Document(s) ☐ Reply to Missing Parts/ Incomplete Application ☐ Reply to Missing Parts under 37 CFR1.52 or 1.53	Remarks	ndscape Table on CD						
	IATURE OF	APPLICANT, ATTO	DNEV O	PACENT				
Firm	GENZYME CO			YACENT				
Signature	De	borah (l	Di	4				
Printed Name	Deborah A. Du	gan		S				
Date	07/19	05	Reg. No.	37,315				
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PTO/SB/17 (12-04v2)
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JUL 2 5 2	Effective on 12/08/2004. Feedbursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known				
P.	E TO ANG		Application Number	10/041,977			
PART & TRADE	FEE TRANS	SWITTAL	Filing Date	January 9, 2002			
	for FY 2	2005	First Named Inventor	NICOLETTE	_		
	☐ Applicant claims small entity st	tatus. See 37 CFR 1.27	Examiner Name	Padmashri Ponnaluri			
		1500	Art Unit	1639			
TOTAL AMOUNT OF PAYMENT	(5) 1,520 -	Attorney Docket No.	GA0118USC				
	METHOD OF PAYMENT (check	all that apply)					
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☐ Charge a	Charge any additional fee(s) or underpayments of fee(s)						
	CFR 1.16 a	nd 1.17			luded on this	form Provide cre	edit card
information and authorization	n on PTO-20	38.			Jidaca on tino	- Tornia i Tornia e Gre	
FEE CALCULATION							
1. BASIC FILING, SE.	-						
	FILING	FEES Small Entity	SEARCH	Small Entity	EXAMIN	ATION FEES Small Entity	
Application Type	Fee (\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	-
Reissue	300	150	500	250	600	300	<del></del>
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES Small Entity							
	Fee DescriptionFee (\$)Fee (\$)Each claim over 20 (including Reissues)5025						
Each independent clair						200	100
Multiple dependent cla	ims					360	180
Total Claims	Extra C			<u>e Paid (\$)</u>			Dependent Claims
20 or HP		-	_ = _	<del></del>		<u>Fee (\$)</u>	Fee Paid (\$)
HP = highest number of Indep. Claims	-	-		a Paid (\$)		<del></del>	
Indep. Claims							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round <b>up</b> to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late	filing surch	arge): 3-month ext	t; Notice of Appea	ıl			<u>1,520</u>

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent) 37,315	Telephone	508-270-2598
Name (Print/Type)	Deborah A. Dugan	Date 07/	19.105

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